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APPLICANTS

Santhana Krishnamachari, Ossining, NY;

**\*\* CONTINUING DATA \*\*\*\*\*** *Yes*

This application is a DIV of 09/110,613 07/06/1998 PAT 6,721,449

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
**\*\* 09/07/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS  
 PHILLIPS ELECTRONICS NORTH AMERICA CORPORATION  
 P.O. BOX 3001/345 ROAD  
 BRIARCLIFF MANOR , NY  
 10510

TITLE  
 COLOR QUANTIZATION AND SIMILARITY MEASURE FOR CONTENT BASED IMAGE RETRIEVAL

FILING FEE  RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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